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PTO/SB/01 (10-00)

Approved for use through 10/31/2002 OMB 0651-0032

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	60,130-986
	First Named Inventor	Ragnar Ledesma
	COMPLETE IF KNOWN	
	Application Number	/ Herewith
	Filing Date	Herewith
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

INDEPENDENT SUSPENSION UNDERCARRIAGE MODULE FOR A LOW FLOOR VEHICLE

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☐ Customer Number or Bar Code Label OR ☒ Correspondence address below

Name David L. Wisz

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State Michigan

ZIP 48009

Country United States

Telephone (248) 988-8360

Fax (248) 988-8363

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

☐ A petition has been filed for this unsigned inventor

Given Name Ragnar
(first and middle [if any])

Family Name Ledesma
or Surname

Inventor's
Signature

Ragnar H. Ledesma

Date 7/9/01

Residence: City Sterling Heights

State MI

Country US

Citizenship United States

Mailing Address 2608 Tallowtree

Mailing Address

City Sterling Heights

State MI

ZIP 48314

Country United States

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name Lawrence
(first and middle [if any])

Family Name Brill
or Surname

Inventor's
Signature

Date

Residence: City Westerville

State OH

Country US

Citizenship United States

Mailing Address 620 Mohican Way

Mailing Address

City Westerville

State OH

ZIP 43081

Country United States

☒ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> Customer Number or Bar Code Label		OR <input checked="" type="checkbox"/> Correspondence address below	
Name David L. Wisz			
Address 400 W. Maple Road			
Address Suite 350			
City Birmingham	State Michigan	ZIP 48009	
Country United States	Telephone (248) 988-8360	Fax (248) 988-8363	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Ragnar		Family Name or Surname Ledesma	
Inventor's Signature		Date	
Residence: City Sterling Heights	State MI	Country US	Citizenship United States
Mailing Address 2608 Tallowtree			
Mailing Address			
City Sterling Heights	State MI	ZIP 48314	Country United States
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Lawrence		Family Name or Surname Brill	
Inventor's Signature <i>Lawrence Brill</i>		Date 9-10-01	
Residence: City Westerville	State OH	Country US	Citizenship United States
Mailing Address 620 Mohican Way			
Mailing Address			
City Westerville	State OH	ZIP 43081	Country United States
<input checked="" type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.			

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PTO/SB/02A (3-97)
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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 2
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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Steven E.				Hunter			
Inventor's Signature	<i>Steven E Hunter</i>					Date	12/11/01
Residence: City	Lancaster	State	OH	Country	United States	Citizenship	US
Post Office Address 3144 Crawfis Road							
Post Office Address							
City	Lancaster	State	OH	ZIP	43130	Country	United States
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Malcolm				Green			
Inventor's Signature	<i>Malcolm Green</i>					Date	9/10/01
Residence: City	Granville	State	OH	Country	United States	Citizenship	UK
Post Office Address 2675 Deeds Road							
Post Office Address							
City	Granville	State	OH	ZIP	43023	Country	United States
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Duy				Lam			
Inventor's Signature	<i>Duy Lam</i>					Date	9/10/01
Residence: City	Baltimore	State	OH	Country	United States	Citizenship	US
Post Office Address 11051 Snyder Church							
Post Office Address							
City	Baltimore	State	OH	ZIP	43105	Country	United States

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ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 2 of 2

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Mike Michael Edward				Schuster			
Inventor's Signature		Michael E. Schuster		Date		July 25, 2001	
Residence: City		Rochester Hills		State		MI	
				Country		United States	
Post Office Address		3375 Eastwood Drive		Citizenship		US	
City		Rochester Hills		ZIP		48309	
				Country		United States	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Tomaz Dopico				Varela			
Inventor's Signature				Date			
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				Country		United States	
Post Office Address		134 Windrow Court		Citizenship		BR	
City		Gahanna		ZIP		43230	
				Country		United States	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature				Date			
Residence: City				State			
				Country			
Post Office Address				Citizenship			
City				ZIP			
				Country			

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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Mike				Schuster			
Inventor's Signature				Date			
Residence: City	Rochester Hills	State	MI	Country	United States	Citizenship	US
Post Office Address	3375 Eastwood Drive						
Post Office Address							
City	Rochester Hills	State	MI	ZIP	48309	Country	United States
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Tomaz Dopic				Varela			
Inventor's Signature	<i>Tomaz Dopic</i>			Date	12-11-01		
Residence: City	Gahanna	State	OH	Country	United States	Citizenship	BR
Post Office Address	134 Windrow Court						
Post Office Address							
City	Gahanna	State	OH	ZIP	43230	Country	United States
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature				Date			
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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